



Date of Inspection: 2.3 FEB 21

Facility Name: BANK CLUB Phone Number: 532-0466 PR ID #: 77  
 Facility Site Address: 190 COMMERCIAL City: PORTOLA Zip: 96122  
 Permit #: 20-052 Exp Date: 6/25/21 Permit Holder: THE PLUMAS COUNTY HEALTH DEPARTMENT  
 Type of Inspection: **SPECIAL**

See reverse side for the code sections and general requirements that correspond to each violation listed below

In = In compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site MAJ = Major violation OUT = Out of Compliance

In	N/O-N/A		COS	MAJ	OUT
<b>DEMONSTRATION OF KNOWLEDGE</b>					
X		1. Demonstration of knowledge; food safety certification			
		Food Safety Cert Name: <u>LEANNA HILL</u> Exp. Date: <u>12/2/25</u>			
		2. All food handlers have valid Food Handler Cards			X
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>					
X		3. Communicable disease; reporting, restrictions & exclusions			
X		4. No discharge from eyes, nose, and mouth			
X		5. Proper eating, tasting, drinking or tobacco use			
<b>PREVENTING CONTAMINATION BY HANDS</b>					
X		6. Hands clean and properly washed; gloves used properly			
X		7. Adequate handwashing facilities supplied & accessible			
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>					
	X	8. Proper hot and cold holding temperatures			
	X	9. Time as a public health control; procedures & records			
	X	10. Proper cooling methods			
	X	11. Proper cooking time & temperatures			
X		12. Proper reheating procedures for hot holding			
<b>PROTECTION FROM CONTAMINATION</b>					
X		13. Returned and re-service of food			
X		14. Food in good condition, safe and unadulterated			
X		15. Food contact surfaces: clean and sanitized			

In	N/O-N/A		COS	MAJ	OUT
<b>FOOD FROM APPROVED SOURCES</b>					
X		16. Food obtained from approved source			
<b>CORONAVIRUS GUIDANCE IMPLEMENTATION</b>					
		17. Takeout, Curbside Pickup, or Delivery Only			
X		18. Social Distancing Implemented			
X		19. Face Covering Used			
<b>Highly Susceptible Populations</b>					
	X	20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
<b>WATER/HOT WATER</b>					
X		21. Hot and cold water available			
<b>LIQUID WASTE DISPOSAL</b>					
X		22. Sewage and wastewater properly disposed			
<b>VERMIN</b>					
X		23. No rodents, insects, birds, or animals			

**FOOD SAFETY AND CORONAVIRUS (COVID-19) SPECIAL INSPECTION OBSERVATIONS**

#2) ENSURE EACH EMPLOYEE HAS A VALID CA FOOD HANDLER CARD OR A CA FOOD HANDLER CERTIFICATION

Received by (Print): BARTENDER PHOTO CAPTURED AT TIME OF INSPECTION Title: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Specialist (Print): Rob Robertson Specialist (Signature): [Signature] Re-inspection Date: \_\_\_\_\_